PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only *(Revised 7-1-15)* Zoning Official_____ Building Official_____

AP#_____ Date Received_____ By_____ Permit #_____

Flood Zone_____ Development Permit_____ Zoning_____ Land Use Plan Map Category_____

Comments_____

FEMA Map#_____ Elevation_____ Finished Floor_____ River_____ In Floodway_____

☐ Recorded Deed or ☐ Property Appraiser PO ☐ Site Plan ☐ EH #_____ ☐ Well letter OR

☐ Existing well ☐ Land Owner Affidavit ☐ Installer Authorization ☐ FW Comp. letter ☐ App Fee Paid

☐ DOT Approval ☐ Parent Parcel #_____ ☐ STUP-MH _____ ☐ 911 App

☐ Ellisville Water Sys ☐ Assessment _____ ☐ Out County ☐ In County ☐ Sub VF Form

Property ID # 03-7S-17-09876-008 Subdivision _____ Lot#____

- New Mobile Home ✓ Used Mobile Home_____ MH Size 32x68 Year 2021
- Applicant Sonya Crews Phone # 863-517-5701
- Address 3311 SW State Rd 247 Lake City, FL 32024
- Name of Property Owner Karen Watson Lucklear Phone# 352-339-5748
- 911 Address Frances Watson Ln, High Springs, FL 32643
- Circle the correct power company - FL Power & Light - (Clay Electric)
  (Circle One) - Suwannee Valley Electric - Duke Energy
- Name of Owner of Mobile Home Karen & Charles Lucklear Phone # 352-339-5748
  Address 416 Frances Watson Ln High Springs, FL 32643
- Relationship to Property Owner —
- Current Number of Dwellings on Property This will make 1
- Lot Size 631 x 691 Total Acreage 10.04
- Do you : Have Existing Drive (Currently using) or Private Drive (Blue Road Sign) or need Culvert Permit (Putting in a Culvert) or Culvert Waiver (Not existing but do not need a Culvert) (Circle one)
- Is this Mobile Home Replacing an Existing Mobile Home NO
- Driving Directions to the Property R on SE Baya Dr, turn L after McDonalds, Slight R on 47-S, L to merge on I-75 S, exit 414, keep R, turn R on US-41S, L on SE Frances Watson Ln; you will need to meet Customer at gate to go back to property
- Name of Licensed Dealer/Installer Rusty Knowles Phone # 386-397-0886
- Installers Address 5801 SW SR 47 Lake City, FL 32024
- License Number IH 1038219 Installation Decal # 72890

Columbia County Property Appraiser

Jeff Hampton

2020 Preliminary Certified
updated: 10/9/2020

Parcel: << **03-7S-17-09876-008** >>

Aerial Viewer | Pictometery | Google Maps

Owner & Property Info

Owner	LOCKLEAR KAREN WATSON 416 SE FRANCES WATSON LN HIGH SPRINGS, FL 32643		
Site	FRANCES WATSON LN, HIGH SPRINGS		
Description*	BEG SE COR OF NE1/4 OF NW1/4, RUN N 631.18 FT, W 691.57 FT, S 629.86 FT, E 691.63 FT TO POB. WD 1415-2376,		
Area	10.04 AC	S/T/R	03-7S-17
Use Code**	TIMBERLAND (005600)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.
**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2019 Certified Values	2020 Preliminary Certified	
There are no 2020 Certified Values for this parcel	Mkt Land (0)	$0
	Ag Land (1)	$2,510
	Building (0)	$0
	XFOB (0)	$0
	Just	$44,788
	Class	$2,510
	Appraised	$2,510
	SOH Cap [?]	$0
	Assessed	$2,510
	Exempt	$0
	Total Taxable	county:$2,510 city:$2,510 other:$2,510 school:$2,510

Sales History

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
7/21/2020	$100	1415/2376	WD	V	U	30

Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
NONE						

Extra Features & Out Buildings (Codes)

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Land Code	Desc	Units	Adjustments	Eff Rate	Land Value
009910	MKT.VAL.AG (MKT)	10.040 AC	1.00/1.00 1.00/1.00	$0	$44,788
005600	TIMBER 3 (AG)	10.040 AC	1.00/1.00 1.00/1.00	$250	$2,510

N.2
Fio.

Jacobsen Homes of Lake City

3973 W. U.S. Hwy. 90
Lake City, Florida 32055
Ph. 386-438-8458 • Fax: 386-438-8472

PURCHASE AGREEMENT

Locally Owned and Operated

SOLD TO Charles Brian Locklear / Karen Watson Locklear PHONE (352) 339-6748 DATE 10/17/20

ADDRESS 4116 SE. Frances Watson Ln High Springs, FL 32643 COUNTY Columbia SALESMAN Gloria

Subject to the Terms and Conditions Stated on Both Sides of this Agreement Seller Agrees to Sell and the Purchaser Agrees to Purchase the Following Described Property:

YEAR	MAKE	MODEL	B. ROOMS	FLOOR SIZE	HITCH SIZE
2021	Jacobsen	IMP-2823	3	L 68 W 32	L 12 W 32

SERIAL NUMBER TBD ☐ NEW ☐ USED COLOR TBD PROPOSED DELIVERY DATE

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES	
Home Set to Code	
Set Up & Delivery	
AC / Heat Pump	
2 sets of Standard Skp	
White T Skirting	
Improvements: up to $12,000	
Any overage is customers	
Responsibility for Standard	
septic, well- Permit and	
house pad	
Above price has no	
Surveys, impact fees	
nor flood zone requirements	

PRICE OF UNIT		$163,266.00
OPTIONAL EQUIPMENT		
COST OF SET-UP PARTS		
SUB-TOTAL		163,266.00
SALES TAX 6% + 50.00		9845.96
Improvements		12,000.00
NON-TAXABLE ITEMS		
VARIOUS FEES		
1. CASH PRICE		$185,111.96
TRADE-IN ALLOWANCE	$	[redacted]
LESS BAL. DUE ON ABOVE	$	
NET ALLOWANCE		
CASH DOWN PAYMENT	1,000.00	
2. LESS TOTAL CREDITS		
3. UNPAID BALANCE OF CASH SALE PRICE		$184,111.96

Title to said equipment shall remain in the Seller until the agreed purchase price therefor is paid in full in cash or by the execution of a Retail Installment Contract, or a Security Agreement and its acceptance by a financing agency; thereupon title to the within described unit passes to the buyer as of the date of either full cash payment or on the signing of said credit instruments even though the actual physical delivery may not be made until a later date.

IT IS MUTUALLY UNDERSTOOD THAT THIS AGREEMENT IS SUBJECT TO NECESSARY CORRECTIONS, AND ADJUSTMENTS CONCERNING CHANGES IN NET PAYOFF ON TRADE-IN TO BE MADE AT THE TIME OF SETTLEMENT.

Purchaser represents he/she examined the product and found it suitable for his/her particular needs, and that it is of acceptable quality and that purchaser relied upon his/her judgement and inspection in making this determination.

Seller is not permitted to make plumbing or electrical connections, or connecting of certain natural gas or propane appliances where state or local ordinances require a licensed plumber or electrician so to do. Special building ordinances or laws requiring plumbing, electrical or construction changes are not the responsibility of Seller or the manufacturer. Seller is not responsible for obtaining health or sanitation permits, nor for local, county or state permits involving restrictive zoning. Cost of changes needed for compliance must be borne by Buyer. It is solely the Buyers responsibility to assure their chosen home site is acceptable for home placement without violation of any local, state, or federal guidelines.

Seller is not responsible or liable for any delays caused by the manufacturer, accidents, strikes, fires, Acts of God or any other cause beyond Seller's control.

There is no assurance a mobile home can remain level when placed, upon any surface other than of blacktop or concrete.

Purchasers certify that the matter printed on the back hereof has been read and agreed to as a part of this agreement the same as though it were printed above the signatures; that buyers are of statutory age or older; or have been legally emancipated; that the within described merchandise, the optional equipment and accessories thereon and, insurance if included, has been voluntarily purchased. The property being traded in is free from all encumbrances whatsoever, except as noted above. Purchaser agrees each paragraph and provision of this contract on both front and back is severable; if one portion thereof is invalid the remaining portion shall, nevertheless, remain in full force and effect.

TRADE-IN DEBT TO BE PAID BY ☐ DEALER ☐ CUSTOMER

Jacobsen Homes of Lake City DEALER
Net Valid Unless Signed and Accepted by an officer of the Company

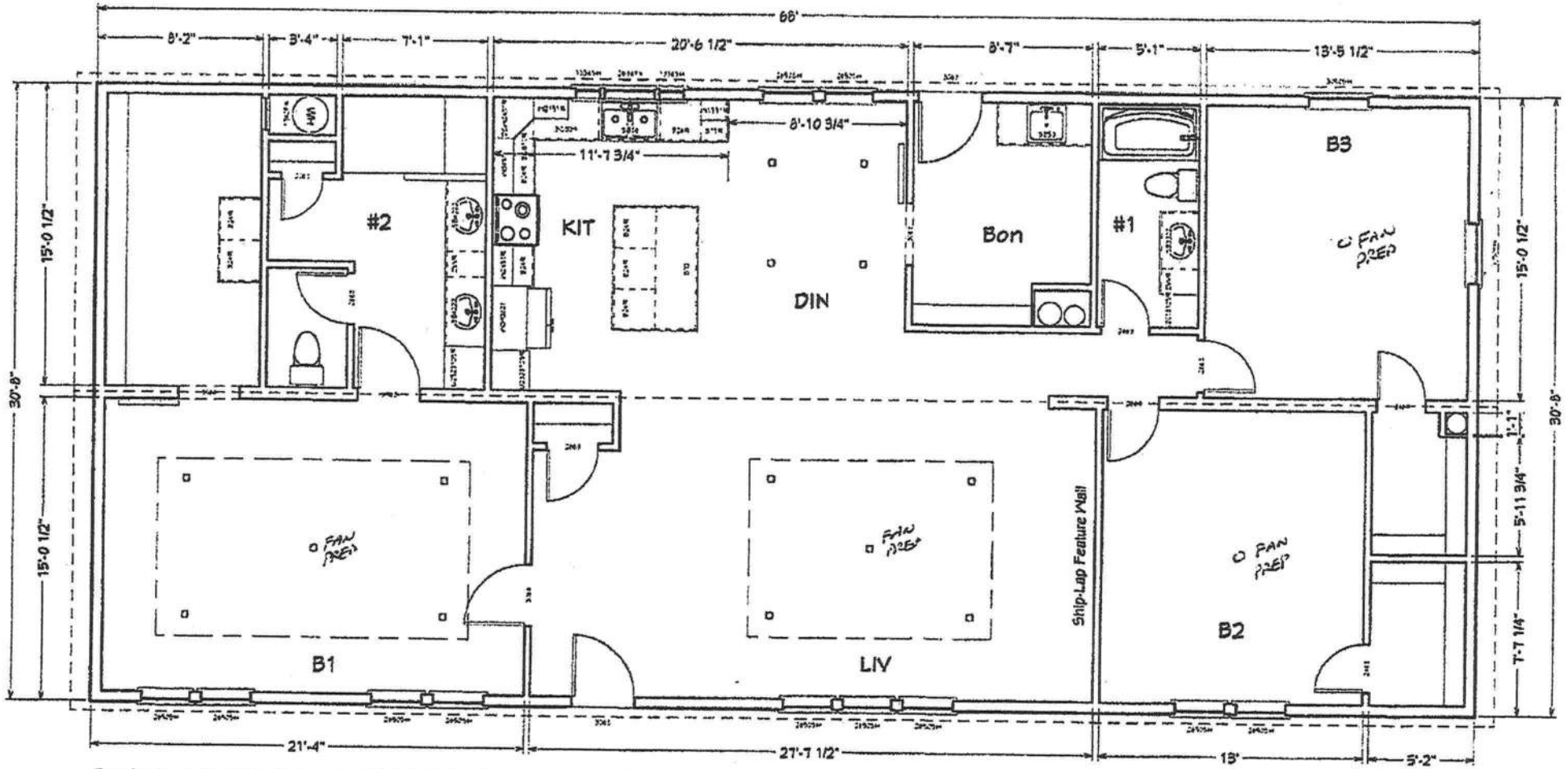
By _____
Approved, Subject to acceptance of financing by bank or finance company.

I, OR WE, HEREBY ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER

SIGNED X _____ PURCHASER

SIGNED X Charles B _____ PURCHASER

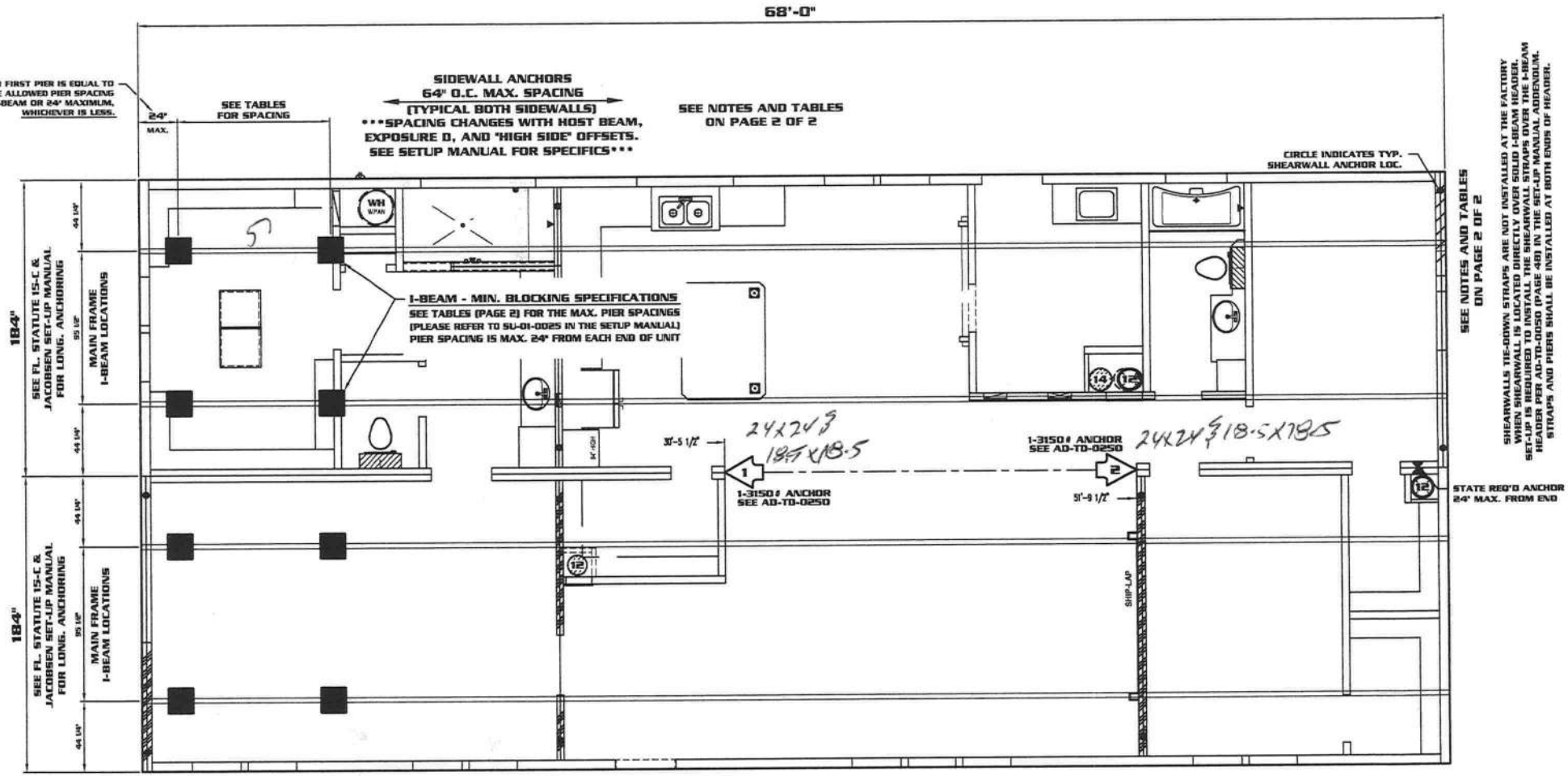
Jac LC "LOCKLEAR" Build As Shown



Drawing is render only, all sizes approximate and subject to engineer review and change. Final Jacobsen print must be signed by dealer and customer prior to construction.

x _____ date: x 11/1/2020

x Charles Ba_____



SEE NOTES AND TABLES ON PAGE 2 OF 2
SEE WARNINGS AND CAUTIONS ON PAGE 2

REFER TO SU-01-0005 FOR ADD'L PIER REQUIREMENTS

IMP-36,966
JACOBSEN HOMES
IMPERIAL 2 24 24 16 2x8 JOISTS

MODEL # CP-2823-966

2x8 FLOOR JOISTS - 16" O.C.

JACOBSEN HOMES
PO BOX 368, 600 PACKARD CT.
SAFETY HARBOR, FLORIDA 34695
(727) 726-1138
www.jachomes.com

REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS

HUD WIND ZONE - 2
HUD WIND EXPOSURE CATEGORY - C
36966 - PAGE 1 OF 2

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT
(THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

JACOBSEN HOMES

PO BOX 368, 600 PACKARD CT.
SAFETY HARBOR, FLORIDA 34695

(727) 726-1138

www.jachomes.com

WARNING:

INSTALLING A MANUFACTURED STRUCTURE/BUILDING CAN BE EXTREMELY DANGEROUS. ONLY QUALIFIED PERSONNEL SHOULD ATTEMPT TO INSTALL A MANUFACTURED STRUCTURE/BUILDING. IMPROPER PROCEDURES AND/OR TECHNIQUES COULD RESULT IN SERIOUS INJURY OR DEATH. IN ADDITION TO THE DANGER TO PERSONNEL, IMPROPER SETUP/INSTALLATION COULD RESULT IN EXTENSIVE/COSTLY DAMAGE TO THE BUILDING/STRUCTURE. NEVER ATTEMPT INSTALLATION IF YOU ARE NOT QUALIFIED AND/OR DO NOT HAVE THE PROPER TOOLS AND/OR EQUIPMENT.

CAUTION:

MANUFACTURED BUILDINGS/STRUCTURES CAN WEIGH SEVERAL TONS. IT IS VERY IMPORTANT THAT ALL PERSONNEL, ON THE JOB SITE, BE QUALIFIED AND PROPERLY/ADEQUATELY TRAINED. A STATE LICENSED SETUP CONTRACTOR IS REQUIRED TO BE RESPONSIBLE FOR ALL SAFETY INITIATIVES, PROGRAMS, POLICIES, AND/OR PROCEDURES THAT MAY BE MANDATED BY OSHA AND/OR ANY OTHER LOCAL, STATE, AND/OR FEDERAL CODES AND/OR REQUIREMENTS. THE CONTRACTOR SHALL INSURE/REQUIRE THAT SAFE AND PROPER TECHNIQUES ARE UTILIZED.

REFER TO AD-TD-0250 THROUGH AD-TD-0254 FOR COLUMN ANCHOR SIZES.

COLUMN INFO. TABLE			COLUMN PAD - MIN. SIZES (sq. in.)					
COL. NUM.	SPAN	LOAD (IN POUNDS)	1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL
1	21'-5"	6135	883	589	442	353	353	353
2	21'-5"	6135	883	589	442	353	353	353
3	0"	0	0	0	0	0	0	0
4	0"	0	0	0	0	0	0	0
5	0"	0	0	0	0	0	0	0
6	0"	0	0	0	0	0	0	0
7	0"	0	0	0	0	0	0	0
8	0"	0	0	0	0	0	0	0
9	0"	0	0	0	0	0	0	0
10	0"	0	0	0	0	0	0	0

NOTES:

1. REFER TO THE MODEL APPROVAL FOR PLAN SPECIFIC INFORMATION.
2. REFER TO THE JACOBSEN HOMES SETUP MANUAL AND ADDENDUM FOR COMPLETE INSTALLATION INSTRUCTIONS. PIERS CAN BE RELOCATED AND/OR SPANS INCREASED PER THE SETUP MANUAL.
3. REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS.
4. REFER TO THE APPROVED FLOOR PLAN FOR SHEARWALL LOCATIONS AND LOADS.
5. REFER TO AD-TD-100 FOR SHEARWALL APPLICATIONS AND TIE-DOWNS.
6. REFER TO THE APPROVED FLOOR PLAN FOR SPECIFIC COLUMN LOCATIONS. COLUMN PIERS SHALL BE LOCATED WITHIN 6" OF EITHER SIDE OF THE COLUMN. ADDITIONAL PIERS MAY BE REQUIRED ALONG THE MATING LINE, SEE THE SETUP MANUAL FOR SPECIFICS.
7. ALL 184" WIDE FLOOR SYSTEMS REQUIRE PERIMETER AND MATING LINE BLOCKING.
8. ALL 2x6 FLOOR SYSTEMS WIDER THAN 144" REQUIRE PERIMETER AND MATING LINE BLOCKING.
9. ANY SIDEWALL AREA WITH A HOST BEAM OR A STRUCTURAL ATTACHMENT SHALL HAVE PIERS AND ANCHORS SPACED NO FURTHER THAN 48" O.C. MAXIMUM. SOME WIND ZONE AREAS MAY REQUIRE CLOSER INSTALLATION. REFER TO THE JACOBSEN HOMES SETUP MANUAL FOR SPECIFICS (SEE SU-01-0005 AND SU-01-0008). WHEN THE ATTACHED STRUCTURE HAS FOURTH WALL CONSTRUCTION OR IS DESIGNED AND CONSTRUCTED TO BE SELF SUPPORTING, THESE ADDITIONAL PIERS AND ANCHORS ARE NOT REQUIRED.
10. MAX. PIER SPACING ON 8" I-BEAM IS 96". MAX. PRIER SPACING ON 10" OR 12" I-BEAM IS 120". SEE NOTE 4 ON PAGES SU-01-0023 THROUGH SU-01-0026.

N10 = SEE NOTE 10.
REFER TO SU-01-0005 FOR ADDITIONAL PIER REQUIREMENTS.

MINIMUM PIER PAD SIZE (sq.in.)		I-BEAM PIER SPACING						MATING LINE PIER SPACING						PERIMETER PIER SPACING					
		1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL	1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL	1000 psf SOIL	1500 psf SOIL	2000 psf SOIL	2500 psf SOIL	3000 psf SOIL	3500 psf SOIL
A	256 sq. in.	30	48 1/2	66 1/2	85	103* N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
B	342.25 sq. in.	42	66 1/2	90 1/2	115* N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
C	396 sq. in.	49	77 1/2	105 1/2* N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
D	400 sq. in.	49 1/2	78 1/2	107 1/2* N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
E	432.875 sq. in.	54	85	116* N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
F	576 sq. in.	74	115* N10	N10 N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96
G	676 sq. in.	87 1/2	N10 N10	N10 N10	N10 N10	N10 N10	N10 N10	96	96	96	96	96	96	96	96	96	96	96	96

REFER TO SU-01-0020, SU-01-0021, AND OTHER DETAILS IN THE SET-UP MANUAL FOR MAXIMUM HEIGHT (THIS IS NOT DESIGNED, NOR INTENDED, TO BE A STILT FOUNDATION)

THIS BLOCKING DIAGRAM IS PROVIDED AS A COURTOUSY ONLY. THE LICENSED SET-UP CONTRACTOR SHALL REVIEW THIS DETAIL AND VERIFY COMPLIANCE. THE LICENSED SET-UP CONTRACTOR IS RESPONSIBLE AND LIABLE FOR ALL INSTALLATION.

HUD WIND ZONE - 2
HUD WIND EXPOSURE CATEGORY - C

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

Installer : Rusty L. Knowles License # IH.1038218

Address of home being installed: Frances Watson Ln, High Springs, Fl 32643

Manufacturer Jacobsen Length x width 32x68

New Home ☑ Used Home ☐

Home installed to the Manufacturer's Installation Manual ☑
Home is installed in accordance with Rule 15-C ☑

Single wide ☐ Wind Zone II ☑ Wind Zone III ☐

Double wide ☑ Installation Decal # 72990

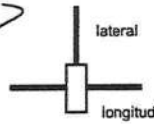
Triple/Quad ☐ Serial # ordered

NOTE: ***if home is a single wide fill out one half of the blocking plan***
if home is a triple or quad wide sketch in remainder of home

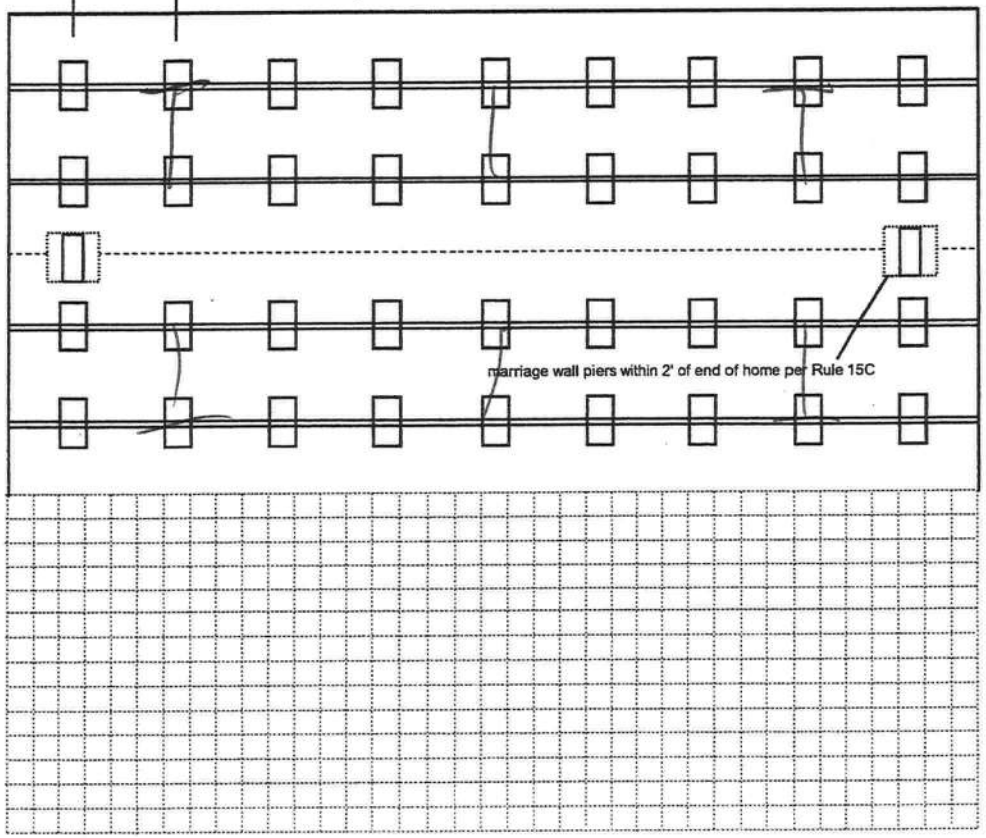
I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials RLK

Typical pier spacing 2' 5'



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf		3'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 23"x 31 1/2"

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.) 16x16

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening	Pier pad size
21'5"	24x24 & 18.5 x 18.5

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer
Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer Oliver Technologies

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft ✓ 5 ft ✓

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

OTHER TIES

	Number
Sidewall	24
Longitudinal	8
Marriage wall	3
Shearwall	2

Mobile Home Permit Worksheet

Application Number: _____ Date: _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf
or check here to declare 1000 lb. soil ✓ without testing.

X .5 X ____ X ____

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X ____ X ____ X ____

TORQUE PROBE TEST

The results of the torque probe test is NA use 11016 inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

RLL Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name Rusty L Knowles

Date Tested 11.5.20

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between mult-wide units. Pg. 15C1

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 15C1

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 15C1

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural Swale Pad ✓ Other

Fastening multi wide units

Floor: Type Fastener: Lags Length: 6" Spacing: 18"
Walls: Type Fastener: Screws Length: 4" Spacing: 12"
Roof: Type Fastener: Lags Length: 6" Spacing: 18"
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials RLL

Type gasket factory installed
Pg. 15C1

Installed:
Between Floors Yes ✓
Between Walls Yes ✓
Bottom of ridgebeam Yes ✓

Weatherproofing

The bottomboard will be repaired and/or taped. Yes ✓. Pg. 15C1
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

Miscellaneous

Skirting to be installed. Yes ✓ No
Dryer vent installed outside of skirting. Yes N/A ✓
Range downflow vent installed outside of skirting. Yes N/A ✓
Drain lines supported at 4 foot intervals. Yes ✓
Electrical crossovers protected. Yes ✓
Other : _____

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature _____ Date 11.5.20

COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Rusty L. Knowles (Installer License Holder Name), give this authority for the job address show below only, Frances Watson Ln High Springs FL 32643 (Job Address), and I do certify that the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is… (Check one)
Sonya Crews	Sonya Crews	✓ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ Property Owner
		___ Agent ___ Officer ___ Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

License Holders Signature (Notarized) | License Number: IH1039219 | Date: 11.5.20

NOTARY INFORMATION:
STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is Rusty Knowles, personally appeared before me and is known by me or has produced identification (type of I.D.)_____ on this 5 day of November, 20 20.

Sandra Elizabeth Tope
NOTARY'S SIGNATURE

(Seal/Stamp)

SANDRA ELIZABETH TOPE
Notary Public - State of Florida
Commission # GG 063811
My Comm. Expires Jan 18, 2021
Bonded through National Notary Assn.

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Rusty Knowles PHONE 386-397-0886

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ Signature _____ License #: _____ Phone #: _____ Qualifier Form Attached ☐
MECHANICAL/ A/C _____	Print Name Michael A. Boland Signature _____ License #: CAC1817716 Phone #: (352) 274-9326 Qualifier Form Attached ☐

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Rusty Knowles PHONE 386-397-0884

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

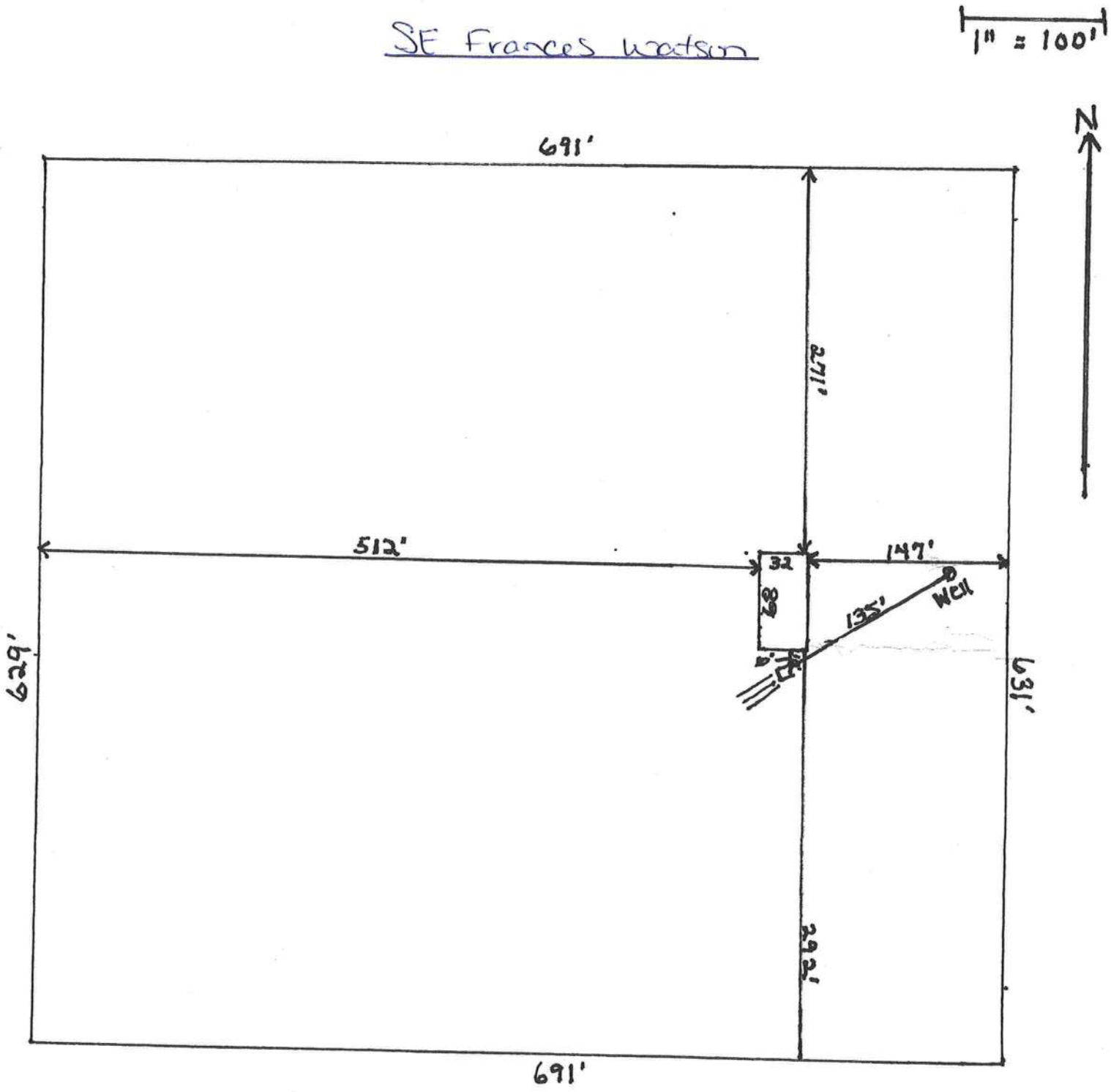
Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ Signature _____ License #: Owner builder Phone #: 352-339-5748 Qualifier Form Attached ☐
~~MECHANICAL/ A/C~~ Electrical	Print Name _____ Signature _____ License #: Owner Builder Phone #: 352-339-5748 Qualifier Form Attached ☐

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 4/27/2017

SE Frances Watson



Locklear